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UTILITY
PATENT APPLICATION
TRANSMITTAL
(Only for new nonprovisional applications under 37 CFR 1.53(b))

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|                        | 7.5                              |
|------------------------|----------------------------------|
| Attorney Docket No.    | 35.C15659                        |
| First Named Inv        | ventor or Application Identifier |
| SHINICHI HAKAMADA      |                                  |
| Evpress Mail I ahel No |                                  |

|            |                                |  |                        | Express Mail I              | Label No.                    | <u> </u>                                       |   |                       |
|------------|--------------------------------|--|------------------------|-----------------------------|------------------------------|--|---|-----------------------|
| See MPE    | -                              | PLICATION ELEMEN<br>Concerning utility patent ap   |                        | ADDR                        | ESS TO:                      | Box Paten                                      | oner for Patents<br>t Application<br>on, DC 20231 | 3                     |
| 1.         | Fee Transmit<br>(Submit an ori | ttal Form<br>ginal, and a duplicate for fee pi   | rocessing)             | 7.                          | CD-ROM or<br>Program (A)     | r CD-R in duplicate,                           |   | Computer              |
| 2.         | Applicant cla<br>See 37 CFR    | ims small entity status.<br>1.27.  |                        | 8.                          |                              | and/or Amino Acid S<br>, <i>all necessary)</i> | Sequence Subn                                     | nission<br>2          |
| 3. X       | Specification                  | Total Pag  | ges 99                 |                             |                              | Computer Readable                              |   | 3993<br>3993          |
| 4. X       | Drawing(s) (3                  | 35 USC 113) Total She  | eets 10                |                             |                              | ation Sequence List                            | -   | 9/92.                 |
| 5.         | Oath or Deck                   | aration Total Pag  | ges                    |                             |                              | paper  |   | 11.0                  |
|            | a. Ne                          | ewly executed (original or co  | py)                    |                             |                              | Statements verifying                           |   |                       |
|            |                                | ppy from a prior application ( or continuation/divisional with   |                        | 9.                          |                              | Papers (cover sheet                            |   |                       |
|            | i. [                           | DELETION OF INV  | /ENTOR(S)              | 10.                         |                              | B(b) Statement<br>is an assignee)              | Pow   | ver of Attorney       |
|            |                                | •  | the prior application, | see 11.                     | •                            | nslation Document                              | `   |                       |
| 6. X       | Application D                  | oata Sheet. See 37 CFR 1.7   | 76                     | 12.                         | Information<br>Statement (   | Disclosure<br>IDS)/PTO-1449                    |   | oies of IDS<br>ations |
|            |                                |  |                        | 13. X                       | Preliminary .                | Amendment                                      |   |                       |
|            |                                |  |                        | 14. X                       |                              | eipt Postcard (MPE<br>specifically itemized    |   |                       |
|            |                                |  |                        | 15.                         |                              | ppy of Priority Docur<br>riority is claimed)   | ment(s)   |                       |
|            |                                |  |                        | 16.                         | Other:                       |  |   |                       |
|            |                                |  | •                      |                             |                              |  |   |                       |
| 479 16 - 6 |                                | ABBURATION   |                        |                             |                              |  |   |                       |
| 17. IT a C | ON HINUING                     | APPLICATION, check app   | ropnate box and sup    | ppy the requisite in        | normation:                   |  |   |                       |
| Prior appl | Continuatio                    |  | Continuation           | n-in-part (CIP)             | of prior appl<br>Group/Art U | lication No/<br>nit:                           |   |                       |
| APPS onl   | nying continuati               | R DIVISIONAL<br>lisclosure of the prior applicati<br>ion or divisional application ar<br>n the submitted application p | nd is hereby incorpora |                             |                              |  |   |                       |
|            |                                |  |                        | SPONDENCE ADD               | RESS                         |  |   |                       |
| x          | Customer Num                   | ber or Bar Code Label  | (Insert Customer No    | 05514<br>or Atlach bar code | label here)                  | or Corres                                      | spondence addre                                   | ass below             |
| NAME       |                                |  |                        |                             |                              |  |   |                       |
|            |                                |  |                        |                             |                              |  |   | -                     |
| Address    |                                |  |                        |                             |                              |  |   |                       |
| City       |                                |  | State                  |                             |                              | Zip Code                                       |   |                       |
| Country    |                                |  | Telephone              |                             |                              | Fax  | <u> </u>  |                       |

| CLAIMS                   | (1) FOR                                 | (2) NUMBER FILED  | (3) NUMBER EXTRA            | (4) RATE                      | (5) CALCULATIONS         |
|--------------------------|---|---|-----------------------------|-------------------------------|--------------------------|
|                          | TOTAL CLAIMS<br>(37 CFR 1.16(c))        | 82+-20 =  | 62                          | X \$ 18.00 =                  | \$1,116.00               |
|                          | INDEPENDENT<br>CLAIMS (37 CFR 1.16(b))  | 1-3 =   | 0                           | X \$ 80.00 =                  | \$0                      |
| ·                        | MULTIPLE DEPENDEN                       | T CLAIMS (if applicable) (37  | CFR 1.16(d))                | \$270.00 =                    | \$ 270.00                |
|                          |   |   |                             | BASIC FEE<br>(37 CFR 1.16(a)) | \$ 710.00                |
|                          |   |   | Total of                    | above Calculations =          | \$2,096.00               |
|                          | Reduction by                            | 50% for filing by small er  | ntity (Note 37 CFR 1.9, 1   | 1.27, 1.28).                  | 0                        |
|                          |   |   |                             | TOTAL =                       | \$2,096.00               |
|                          |   |   |                             |                               |                          |
| 19. Sr<br>a.<br>b.<br>c. | A small er and desire                   | ntity statement is enclose<br>ntity statement was filed i<br>ed.<br>er claimed. |                             | al application and su         | ch status is still prope |
| 20                       | X A check in the amo                    | ount of \$ <u>2,096.00</u> to cove  | er the filing fee is enclos | ed.                           |                          |
| 21.                      | A check in the amo                      | ount of \$ to   | cover the recordal fee is   | enclosed.                     |                          |
| 22. Th<br>No             | ne Commissioner is hereb<br>o. 06-1205: | y authorized to credit ove  | erpayments or charge th     | e following fees to De        | eposit Account           |
| a.                       |   | ired under 37 CFR 1.16.   |                             |                               |                          |
|                          | 1                                       | : d d 07 OFD 4 47   |                             |                               |                          |
| b.                       | X Fees requ                             | ired under 37 CFR 1.17.   |                             |                               |                          |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED |                  |  |
|---|------------------|--|
| NAME  | LEONARD P. DIANA |  |
| SIGNATURE   | 217. Nama 29.46  |  |
| DATE  | August 7, 2001   |  |

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